

University of massachusetts dai imouth HOUSING AND DINING SERVICES CO! TRACT 2012 - 2013 ACADEMIC YEAR UPPER CLASS CONTRACT

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Emergency Contact: Name Emergency Contact: Name	they entresees a m	
(hinh) to 3 (10W)		
Rank Room Type preferences from i (high) to 3 (low) Room Type Residence Hall S7,498		need assistance in case of an emergency requesting ADA Reasonable accommodations and be submitting my paper work to the housing office
Triple/Quad Transduction 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174 174	Qr	natic Housing itance Awareness ors (invite only as space permits)
Page Page	720	inmate requests are due no luter than June 8, 2012 and ure gent upon bed space availability
Residential Technology Fee (all residents) \$353		
 Rates ponding board approval Most plan required for Traditional, Cak Glen, Pine Date only, I proference For Woodlands and Cedar Dell residents only 	z, * Refer 10 W	te for thematic Housing definitions and requirements.
l acknowledge that my signature on this document constitutes above in accordance with the Terms and Conditions of Occup	a binding contra ency which I ha	ic for the entire academic year (both semesters) stated reviewed at: www.umussd.edu/housing
apone in accordance with the 1 cm		Winter Intersession.
above in accordance with the remaining during some or a Spring Break, Summer Intersession) and would like to year contract and place a \(\text{in the following box} \)	We will contact:	y with more information about 10 and 12
month contract obnous.	45 act. 1511	to a made abide by the Terms and
Conditions of Occupancy. I made the choice or preferred housing assignment.	are made pased	7/22/12
Dahoum.		Dufe
Student Sjenkture		
Parent Signature (for students under 18 yes of age)		1 illa MA 02139
Parent Signature (for students unto 19)	Parent Ci	Borent Zin
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Housing Choice Form

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Name: Dzhokhar Tsarnaev Student ID:
Date of Birth: E-mail:
Cell phone: 857 247 5112 Home Phone:
Please number all building and room types* that you would be interested in living in on-campus from one to six, with one being the most desired and six being least desired. If you have a specific room or person you would like to live with, please put their information in the comments section below. Please note that this is a request, and your specific room/room type may not be available when assignments are being made. Oak Glen Double Room
* Room Rates can be found at http://www.umassd.edu/housing/roomdiningrates
Room Offer: 734/- (Offer date: 7/2) 10m
Comments:
Date entered: Entered by: